FINANCIAL STATEMENT

COMPLETE ENTIRE PAGE

Waukesha County		Case No.			
Court Address: Circuit Court Business	Center Court Tele	ephone No.: 262-548-7494			

515 W. Moreland Blvd., Room C-112 Waukesha. WI 53188

Waukesha	, WI 53188								
Personal Information									
Name (last, first, middle)				Date of Birth Socia			al Security No.		
Address: House	□ Apartment	□ Lot No.	(City			Zip		
Home Phone No.	Work Phone No.	Cell I	Phone	No.	Drivers License No.	•		State	
Mailing Address (if different than above) Marital Status: □ single □ married □ separated □ widowed								□ widowed	
□ divorced If divorced, date final Name and address of nearest living relative Relationship Phone No.									
Employer #1 (Company Na	me)			Leng				of Employment	
Address				City				Zip	
Employer #2 (Company Na	me)						Length	of Employment	
Address					City			Zip	
If Self-Employed, Type of E	Business/Trade		If Une	employed,	Source of Support :	□ W-		□ Food Stamps	
						□ SS		□ GA –Medical Program	
Assets									
Real estate(describe):						Value \$			
Vehicle #1 Year/Make								Present Value \$	
Vehicle #2 Year/Make								Present Value \$	
Bank/Financial Account #	N	Name and Address of Financial Institution						Present Balance \$	
Bank/Financial Account #	N	Name and Address of Financial Institution Present Balance \$							
Investment/Brokerage Accou	int # N					Present Balance \$			
Other Property such as boats	s, snowmobiles (desc	cribe):						Value \$	
						Total	Assets	\$	
Monthly Income (take home)	\$				Mortgage or Rent			\$	
Monthly Income (take home	/ spouse) \$				Utilities			\$	
Unemployment Benefits \$					Vehicle Payments \$				
Social Security \$					Insurance (vehicle	Insurance (vehicle/health/life) \$			
Child Support \$					Other Loan Payme	Other Loan Payments \$			
Alimony/Maintenance \$					Child Support/Alim	Child Support/Alimony			
Disability \$					Medical Payments	Medical Payments \$			
Veteran's Benefits \$					Court Payments	Court Payments \$			
Interest/Dividends \$					Other:	Other: \$			
Other (cash)	\$								
TOTAL INCOM	ME \$				тс	TAL E	XPENSES	S \$	

I certify under penalty of perjury that foregoing is a complete and accurate statement of my income, assets, and expenses and that I have no other additional income. I will supply supporting documentation of income and debts upon request.

Date	Signature	